

DECLARATION UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

10/524110

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: PAYMENT MEDIA MANAGEMENT

described and claimed in international application number PCT/US03/27724 filed September 5, 2003.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

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U.S. Provisional Patent Application No. 60/448,484 filed February 21, 2003

U.S. Provisional Patent Application No. 60/460,055 filed April 4, 2003

U.S. Provisional Patent Application No. 60/460,420 filed April 7, 2003

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ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 Typewritten Full Name of Sole or First Inventor: Harlan A. Hurwitz
 2 Inventor's Signature: [Signature]
 3 Date of Signature: 30 2005
 Residence: River Edge New Jersey U.S.A.
 City State or Province Country
 Citizenship: United States
 Post Office Address: 9 Irenc Court, River Edge, New Jersey 07661, USA
 (Insert complete mailing address, including country)

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

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2-00
1 **Typewritten Full Name
of Joint Inventor:**

Stewart A KAUTSCH
Given Name Middle Initial Family Name

2 **Inventor's Signature:**

Stewart A. Kautsch

3 **Date of Signature:**

November 17 2005
Month Day Year

Residence:

Rutherford NJ New Jersey USA
City State or Province Country

Citizenship:

United States

Post Office Address:

(Insert complete mailing
address, including country)

113 Feronia Way, Rutherford, New Jersey 07070, USA

1 **Typewritten Full Name
of Joint Inventor:**

Brendan Kevin MURPHY
Given Name Middle Initial Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month Day Year
Residence: Cedar Grove New Jersey USA
City State or Province Country

Citizenship:

United States

Post Office Address:

(Insert complete mailing
address, including country)

139 Sherman Avenue

Cedar Grove, NJ 07009

1 **Typewritten Full Name
of Joint Inventor:**

Robert PICKLES
Given Name Middle Initial Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month Day Year
Residence: Chesapeake Virginia USA
City State or Province Country

Citizenship:

United States

Post Office Address:

(Insert complete mailing
address, including country)

1357 Danielle Court, Chesapeake, Virginia 23320, USA

1 **Typewritten Full Name
of Joint Inventor:**

Daniel M. WOBSER
Given Name Middle Initial Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month Day Year
Residence: Jackson New Jersey USA
City State or Province Country

Citizenship:

United States

Post Office Address:

(Insert complete mailing
address, including country)

935 Woodlane Road, Jackson, New Jersey 08527, USA

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.

(Discard this page in a sole inventor application)

1 **Typewritten Full Name of Joint Inventor:** Stewart A. KAUTSCH
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

Residence: Rutherford New Jersey USA
City State or Province Country

Citizenship: United States

Post Office Address: 113 Feronia Way, Rutherford, New Jersey 07070, USA
(Insert complete mailing address, including country)

3-00
1 **Typewritten Full Name of Joint Inventor:** Brendan Kevin MURPHY
Given Name Middle Initial Family Name

2 **Inventor's Signature:** [Signature]

3 **Date of Signature:** 8/6/05
Month Day Year

Residence: Cedar Grove New Jersey USA
City State or Province Country

Citizenship: United States

Post Office Address: 139 Sherman Avenue
(Insert complete mailing address, including country) Cedar Grove, NJ 07009

1 **Typewritten Full Name of Joint Inventor:** Robert PICKLES
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

Residence: Chesapeake Virginia USA
City State or Province Country

Citizenship: United States

Post Office Address: 1357 Danielle Court, Chesapeake, Virginia 23320, USA
(Insert complete mailing address, including country)

1 **Typewritten Full Name of Joint Inventor:** Daniel M. WOBSE
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

Residence: Jackson New Jersey USA
City State or Province Country

Citizenship: United States

Post Office Address: 935 Woodlane Road, Jackson, New Jersey 08527, USA
(Insert complete mailing address, including country)

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(Discard this page in a sole inventor application)

1 **Typewritten Full Name
of Joint Inventor:**

Stewart	A.	KAUTSCH
Given Name	Middle Initial	Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

	Month	Day	Year
Residence:	Rutherford	New Jersey	USA
	City	State or Province	Country

Citizenship: United States

Post Office Address: 113 Feronia Way, Rutherford, New Jersey 07070, USA
(Insert complete mailing
address, including country)

1 **Typewritten Full Name
of Joint Inventor:**

Brendan	Kevin	MURPHY
Given Name	Middle Initial	Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

	Month	Day	Year
Residence:	Cedar Grove	New Jersey	USA
	City	State or Province	Country

Citizenship: United States

Post Office Address: 139 Sherman Avenue
(Insert complete mailing
address, including country) Cedar Grove, NJ 07009

4-00
1 **Typewritten Full Name
of Joint Inventor:**

Robert		PICKLES
Given Name	Middle Initial	Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

	Month	Day	Year
Residence:	Chesapeake	VA. Virginia	USA
	City	State or Province	Country

Citizenship: United States

Post Office Address: 1357 Danielle Court, Chesapeake, Virginia 23320, USA
(Insert complete mailing
address, including country)

1 **Typewritten Full Name
of Joint Inventor:**

Daniel	M.	WOBSER
Given Name	Middle Initial	Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

	Month	Day	Year
Residence:	Jackson	New Jersey	USA
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Citizenship: United States

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		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:	Month	Day	Year
				USA
	Residence:	Rutherford	New Jersey	Country
		City	State or Province	
	Citizenship:	United States		
	Post Office Address: (Insert complete mailing address, including country)	113 Feronia Way, Rutherford, New Jersey 07070, USA		
1	Typewritten Full Name of Joint Inventor:	Brendan	Kevin	MURPHY
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:	Month	Day	Year
				USA
	Residence:	Cedar Grove	New Jersey	Country
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	Citizenship:	United States		
	Post Office Address: (Insert complete mailing address, including country)	139 Sherman Avenue Cedar Grove, NJ 07009		
1	Typewritten Full Name of Joint Inventor:	Robert		PICKLES
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:	Month	Day	Year
				USA
	Residence:	Chesapeake	Virginia	Country
		City	State or Province	
	Citizenship:	United States		
	Post Office Address: (Insert complete mailing address, including country)	1357 Danielle Court, Chesapeake, Virginia 23320, USA		
1	Typewritten Full Name of Joint Inventor:	Daniel	M.	WOBSER
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1	Typewritten Full Name of Sole or First Inventor:	Harlan	A.	HURWITZ
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:			
		Month	Day	Year
	Residence:	River Edge	New Jersey	U.S.A.
		City	State or Province	Country
	Citizenship:	United States		
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1	Typewritten Full Name of Sole or First Inventor:	<u>Harlan</u>	<u>A.</u>	<u>HURWITZ</u>
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:	<u></u>		
3	Date of Signature:	<u></u>	<u></u>	<u></u>
		Month	Day	Year
	Residence:	<u>River Edge</u>	<u>New Jersey</u>	<u>U.S.A.</u>
		City	State or Province	Country
	Citizenship:	<u>United States</u>		
	Post Office Address:	<u>9 Irenc Court, River Edge, New Jersey 07661, USA</u>		
	(Insert complete mailing address, including country)	<u></u>		

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Harlan Arthur HURWITZ et al.

Application No.: 10/524,110

Filed: December 5, 2005

Docket No.: 115572.01

For: PAYMENT MEDIA MANAGEMENT

**TRANSMITTAL OF POWER OF ATTORNEY AND
STATEMENT UNDER 37 CFR § 3.73(b)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is a Power of Attorney from the Assignee.

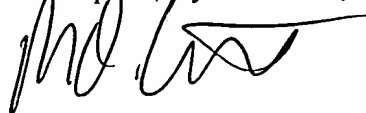
In compliance with 37 CFR §3.73(b), the undersigned hereby states that DE LA RUE INTERNATIONAL LTD. is the assignee of the entire right, title and interest in the patent application identified above by virtue of an assignment from the inventors of the patent application identified above. A copy of the assignment is attached hereto and is concurrently being submitted for recordation.

The undersigned is authorized to act on behalf of the assignee.

In accordance with 37 CFR §1.36(a), submission of this Power of Attorney revokes any powers of attorney previously given.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD
BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944, TELEPHONE
(703) 836-6400.**

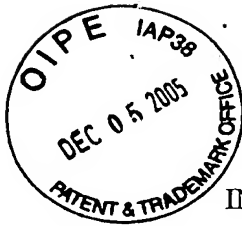
Respectfully submitted,



Mario A. Costantino
Registration No. 33,565

MAC/sxb

Date: December 5, 2005



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Harlan Arthur HURWITZ et al.

Application No.: 10/524,110

Filed: December 5, 2005

Docket No.: 115572.01

For: PAYMENT MEDIA MANAGEMENT

ASSERTION OF LARGE ENTITY STATUS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Entitlement to Large Entity Status is hereby asserted. Applicants do not qualify for Small Entity Status and have never asserted Small Entity Status. Accordingly, it is respectfully requested that the Patent Office records be marked to indicate that Applicants are not entitled to Small Entity Status, and that Large Entity fees be accepted henceforth in this patent application.

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Scott M. Schulte
Registration No. 44,325

JAO:SMS/sxb
Date: December 5, 2005
OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400

<p>DEPOSIT ACCOUNT USE AUTHORIZATION Please grant any extension necessary for entry; Charge any fee due to our Deposit Account No. 15-0461</p>
--

10/524110

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

GENERAL POWER OF ATTORNEY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Owner Name: DE LA RUE INTERNATIONAL, LTD.

hereby appoints the patent practitioners associated with Oliff & Berridge, PLC Customer No. 25944 as attorneys of record to prosecute any and all patents and patent applications in which this General Power of Attorney is filed, and all continuations and divisions thereof, owned in whole or in part by the above-named owner, and to transact all business in the Patent and Trademark Office.

The undersigned is authorized to execute this document as or on behalf of the owner.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION
SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944,
TELEPHONE (703) 836-6400.

23 July 2004
Date

DEREK M. Wallace
Signature

Typed Name: DEREK. MICHAEL. WALLACE.

Title: AUTHORISED SIGNATORY
(if acting on behalf of an Owner)

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